PART B - FEE(S) TRANSMITTAL

Complete and send this form, together

applicable fee(s), to: Mail Mail Stop ISSt FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifics	ica ociów di allectea di	for tran ng the herwise	esmitting the ISS Patent, advance of in Block 1, by (UE FEE and PUBLI orders and notification a) specifying a new	CAT n of corre	ION FEE (if required maintenance fees will espondence address; an	d). Bloc be mai nd/or (b	cks 1 through 5 shiled to the current) indicating a sepa	ould be completed wher correspondence address a rate "FEE ADDRESS" for	
	AUONS. DENCE ADDRESS (Note: Use B		No Fee	te: A certificate of ma e(s) Transmittal. This copers. Each additional p	uiling ca certificat aper, su	an only be used for te cannot be used for ich as an assignmer	domestic mailings of the rany other accompanying or formal drawing, mus			
23565 KLAUBER & 411 HACKENS HACKENSACH	JN 2 2 2009 18		have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
HACKENSACK NJ 07601 6/23/2009 HVUONG2 00000016 09784553 01 FC:2501 755.00 OP 02 FC:1504 300.00 OP 03 FC:8001 30.00 OP				MOBMARIT	I I	Michele Hofhe	err	Joshe	(Depositor's name)	
	70:0001					June 19, 2009 (Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVE					EY DOCKET NO.	CONFIRMATION NO.	
09/784,553 TITLE OF INVENTION	02/16/2001 I: ZA LOOPS OF BRON	10DOM	1AINS	Ming-Ming Zho	ou		2459-	-1-003 CIP	3124	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE I		PREV. PAID ISSUE FI	EE T	OTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755		\$300		\$0		\$1055	08/27/2009	
EXAMINER		ART UNIT		CLASS-SUBCLASS]				
LUCAS, ZACHARIAH 1648				530-300000						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
(A) NAME OF ASSIC J. David Gl Mt. Sinai Sc	less an assignee is ident h in 37 CFR 3.11. Comp GNEE .adstone Insti chool of Medic	fied be letion of tute ine	low, no assignee of this form is NO	data will appear on to a substitute for filin (B) RESIDENCE: (Government) Irvine, Covernment, New York,	the page an CITY	atent. If an assignee i assignment. 'and STATE OR COU ifornia ew York	NTRY))	cument has been filed for	
4a. The following fee(s) a Solution Size Issue Fee Description Publication Fee (N) Advance Order - #	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-1153 (enclose an extra copy of this form).									
a. Applicant claims	tus (from status indicated s SMALL ENTITY statu d Publication Fee (if requ	s. See 3	7 CFR 1.27.	I from anyona other ti	o long	ger claiming SMALL E	ENTITY	' status. See 37 CFF	t 1.27(g)(2). assignee or other party in	
Authorized Signature	ecords of the United Sta	es Pater	and Trademark	office.	1411 U	Date June			assignee of other party in	
Typed or printed name David Smith Registration No. 39,839 This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process)										
This collection of information	ation is required by 37 C	FR 1.31	1. The informatio	n is required to obtain	or re	etain a benefit by the p	ublic wl	hich is to file (and b	y the USPTO to process)	

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.